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Bib Data Sheet

CONFIRMATION NO. 4080

| SERIAL NUMB 09/879,517 | | FILING DATE 06/12/2001 RULE | C | CLASS 128 | GROUP ART UNIT 3761 | | ATTORNEY DOCKET NO. 64,149-097 | | |
|--|---|--|---------------|---------------------------|------------------------|--|--------------------------------------|------------|---|
| Anjana S. V Lawrence A Michael W Christophe ** CONTINUING THIS APPI ** FOREIGN APP | Wills, A. Mo . Trull er J. K DAT/ LICAT | an, Cary, NC; Cary, NC; nahan, Willow Spring, , Apex, NC; nors, Raleigh, NC; A************************************ | * 58,776 0 | | | | | | · |
| Foreign Priority claimed yes no 35 USC 119 (a-d) conditions yes no Met after met Allowance Verified and Acknowledged Examiner's Signature Initials | | | | STATE OR COUNTRY NC | DRAWING CL | | TOT. CLAI 71 | IMS CLAIMS | |
| ADDRESS HOWARD & HON The Pinehurst Of 39400 Woodward Bloomfield Hills, | fice C | nue, Suite 101 | | | | | | | |
| TITLE Medicament resp | irator | y delivery device, cartr | idge and | method of ma | king sa | me | | | |
| RECEIVED | FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following: | | | | | ☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit | | | |